## CAMPAIGN FINANCE REPORT STATE OF WISCONSIN GAB-2

#### COMMITTEE IDENTIFICATION

Filing Period Name:	July Continuing 2012		OFFICE USE ONLY
Name of Committee/Corporation:	Pruess for Assembly		<12 × 12 × 12 × 12 × 12 × 12 × 12 × 12 ×
Street Address:	334 23rd Street		
City, State and Zip:	Two Rivers, WI 54241	GAB	<b>ID</b> : 0105245
SUMMARY OF RECEIPTS.	AND DISBURSEMENTS	Column A This Period	Column B Calendar Year-To-Date
1. RECEIPTS			
1A. Contributions (Including	ng Loans) from Individuals	\$300.0	0 \$300.00
1B. Contributions from Co	mmittees (Transfers-In)	\$0.0	0 \$0.00
1C. Other Income and Co	mmercial Loans	\$0.0	0 \$0.00
TOTAL RECEIPTS	(Add totals from 1A, 1B and 1C)	\$300.0	\$300.00
2. DISBURSEMENTS	•		
2A. Gross Expenditures		\$117.6	0 \$117.60
2B. Contributions to Com	mittees (Transfers-Out)	\$0.0	0 \$0.00
TOTAL DISBURSEMENTS	(Add totals from 2A and 2B)	\$117.6	0 \$117.60

#### CASH SUMMARY

Cash Balance Beginning of Report*	\$0.00	
Total Receipts	\$300.00	
Subtotal	\$300.00	
Total Disbursements	\$117.60	
CASH BALANCE END OF REPORT*	\$182.40	
INCURRED OBLIGATIONS		
(Balance at the Close of This Period-3A)	\$26.25	
LOANS (Balance at the Close of This Period-3B)	\$0.00	

<sup>\*</sup>Cash Balance as reported by committee

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer:	Signature of Candidate or Treasurer	Date:
St. Mary, Daniel		Daytime Phone:

**NOTE:** The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

GAB-2 (Rev. 12/03) This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984, 608-266-8005.

# SCHEDULE 1-A

# RECEIPTS Contributions From Individuals

Date	Full Name	Address	Occupation	Employer Name	Employer Address	Amount	YTD
Monetary							
03/27/2012	Pruess, Larry	334 23rd Street, Two Rivers, WI 54241				\$200.00	\$200.00
04/09/2012	Pruess, Larry	334 23rd Street, Two Rivers, WI 54241				\$100.00	\$300.00
					Sub Total	\$300.00	
			7	Total Unitemize	ed Contributions	\$0.00	
			To	otal Anonymou	us Contributions	\$0.00	
	Grand Total					\$300.00	
Non-Monetary (-):						\$0.00	
Loan Forgiven (-):						\$0.00	
					Total	\$300.00	

### SCHEDULE 1-B

# RECEIPTS Contributions from Committees (Transfers-In)

Date	Full Name	Address	Amount	YTD
		Grand Total	\$0.00	
		\$0.00		
		Total	\$0.00	

# SCHEDULE 1-C

# RECEIPTS Other Income and Commercial Loans

Date	Full Name	Address	Amount	YTD
		Total	\$0.00	

# SCHEDULE 2-A

#### DISBURSEMENTS Gross Expenditures

Date	Full Name	Address	Vendor Name	Vendor Address	Expense Purpose	Amount
Monetary	•					
04/06/2012	Mr. Otek Sign & Textile	329 South State Street, Mishicot, WI 54228			Printing Misc. (buttons, bumper stickers, t- shirts)	\$65.10
	Comment(s): Printing for	500 business of	cards.			
04/17/2012	Mr. Otek Sign & Textile	329 South State Street, Mishicot, WI 54228			Printing Misc. (buttons, bumper stickers, t- shirts)	\$52.50
	Comment(s): Printing of	24" x 36" sign				
					Sub Total	\$117.60
					Grand Total	\$117.60
				No	n-Monetary (-):	\$0.00
					Total	\$117.60

# SCHEDULE 2-B

# DISBURSEMENTS Contributions To Committees (Transfers-Out)

Date	Full Name	Address	Vendor Name	Vendor Address	Amount
Grand Total					\$0.00
	on-Monetary (-):	\$0.00			
	\$0.00				
	\$0.00				

# SCHEDULE 3-A

#### **ADDITIONAL DISCLOSURE**

#### **Incurred Obligations Excluding Loans**

Complete Committee Name: Pruess for Assembly
Incurred Obligation Outstanding Amount: \$0.00

Date	Full Name	Address	Amount
Incurred Oblig	ation		
06/29/2012	Mr. Otek Sign & Textile	329 South State Street, Mishicot, WI 54228	\$26.25
	Comment(s): Relettering of 24" x 36" sign		
		Sub Total	\$26.25
		Grand Total	\$26.25

Date	Full Name	Amount Paid
	Grand Total	\$0.00

### SCHEDULE 3-B

#### **ADDITIONAL DISCLOSURE**

#### Loans

#### **Individual, Committee or Commercial**

Complete Committee Name: Pruess for Assembly

**Loans Outstanding Amount:** \$0.00

Date	Lender Name	Address	Loan Amount	Loan Payment + Forgiven Amount	Outstanding Amount
				Grand Total	\$0.00